This Page Is Inserted by IFW Operations and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents will not correct images, please do not report the images to the Image Problem Mailbox.

SENT BY: UVA. - DOM;

11-01

033493-001 Attorney's Docket No.

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Į	CHICKEN	GROWTH HORMONE RELEASING HO	RMONE RECEPTOR	
he	specification	on of which (check only one item below):		
		is attached hereto.		
		was filed as United States application		
		Number	on	
		and was amended	on	(if applicable)
		was filed as PCT international application		
		Number US00/16135	on June 12, 2000	
		and was amended	on	(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, \$1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. §119		
Ų.S.A.	60/138,768	12/06/1999	Х	Yes	No
U.S.A.	60/176.387	14/01/2000	Х	Yes	No
				Yes	No
			T	Yes	N
···				Yes	N

33,815

34,040

į.i.



Combined Declaration for Patent Application and Power of Attorney (Includes Reference to PCT International Applications) Attorney's Docket No. 033493-001 Page 2 of 3

Bruce T. Wieder

Todd R. Walters

I hereby appoint the following attorneys and agent(s) to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in connection with international applications directed to said invention:

William L. Mathis	17,337	Eric II. Weisblan	30,505
Robert S. Swecker	19,885	James W. Peterson	26,057
Platon N. Mandros	22,124	Teresa Stanek Rea	30,427
Benton S. Duffett, Jr.	22,030	Robert E. Krebs	25,885
Norman H. Stepno	22,716	William C. Rowland	30,888
Ronald L. Grudziecki	24,970	T. Gene Dillahunty	25,423
Frederick G. Michaud, Jr.	26,003	Patrick C. Keane	32,858
Alan E. Kopecki	25,813	B. Jefferson Boggs, Jr.	32,344
Regis E. Slutter	26,9 99	William H. Benz	25,952
Samuel C. Miller, III	27,360	Peter K. Skiff	31,917
Robert G. Mukai	28,531	Richard J. McGrath	29,195
George A. Hovanec, Jr.	28,223	Matthew L. Schneider	32,814
James A. LaBarre	28,632	Michael G. Savage	32,596
E. Joseph Cless	28,510	Creald F. Swiss	30,113
R. Darmy Huntington	27,903	Charles F. Wieland III	33,0 9 6

Ronni S. Jillions 31,979 Harold R. Brown III 36,341 Allen R. Baum 36,086 Brian P. O'Shaughnessy 32,747 Kenneth B. Leffler 36,075 Fred W. Hathaway 32,236 Wondi L. Weinstein 34,456 Mary Ann Dillahunty 34,576

> 21839

and: Brian P. O'Shaughnessy



Address all correspondence to:

MATHIS, L.L.P.

Brian P. O'Shaughnessy, Esq. BURNS, DOANE, SWECKER &

P.O. Box 1404 Alexandria, Virginia 22313-1404

Address all telephone calls to: Brian P. O'Shaughnessy

at (703) 836-6620.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.



FULL NAME OF SOLE OR FIRST INVENTOR	Michael O. Thomer
Signature	Miscen O. Ihm
Date	12.1.2001
Residence (City, State, Country)	North Coaden VA, USA VA
Citizenship	USA
Mailing Address	3140 PLANK ROAD
City, State, ZIP, Country	NORTH SAMEN, VA 22959
FULL NAME SECOND INVENTOR, IF ANY	Bruce David Caylinn
Signature	

pplication and Power of Attorney Combined Declaration for Pate (Includes Reference to PCT International Applications) Attorney's Docket No. 033493-001 Page 2 of 3

I hereby appoint the following attorneys and agent(s) to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in connection with international applications directed to said invention:

	Robert G. Mukai George A. Hovanec, Jr. James A. LaBarre E. Joseph Gess	28,531 Richard J. McGrath 28,223 Matthew L. Schneider 28,632 Michael G. Savage 28,510 Gerald F. Swiss	26,057 To 30,427 Re 25,885 Hi 30,888 Al 25,423 Br 32,838 K. 32,344 Fr 25,952 W 31,917 M 29,195 32,814 32,596 30,113		33,81 34,0 31,97 36,34 36,01 32,7 36,07 32,2: 34,4 34,5
--	---	--	---	--	--

and: Brian P. O'Shaughnessy

Address all correspondence to:

Brian P. O'Shaughnessy, Esq. Burns, Doane, Swecker &

21839

MATHIS, L.L.P.

1404

P.O. Box 1404

Alexandria, Virginia 22313-

Address all telephone calls to: Brian P. O'Shaughnessy

at (703) 836-6620.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR	Michael O. Thorner
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP, Country	
FULL NAME SECOND INVENTOR, IF ANY	Bruce David Gaylinn
Signature	Amy amini
Date	12/11/01
Residence (City, State, Country)	Louisa, *irginia, U.S.A. VA
Citizenship	USA
Mailing Address	16172 Louisa R oad
City, State, ZIP, Country	Louisa, Virginia 23093, U.S.A.

SENT BY: UVA. - DOM;

DEC-11-01 2:59PM;

Combined Declaration for Patent Application and Power of Attorney

(Includes Reference to PCT International Applications)
Attorney's Docket No. 033493-001 Page 3 of 3

Date	
Residence (City, State, Country)	Louisa, Virginia, U.S.A.
Citizenship	
Mailing Address	16172 Louisa R oad
City, State, ZIP, Country	Louisa, Virginia 23093, U.S.A.
FULL NAME THIRD INVENTOR, IF ANY	Andrew Toogood
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP. Country	
FULL NAME FOURTH INVENTOR, IF ANY	Stove Harvey
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP, Country	
FULL NAME FIFTH INVENTOR, IF ANY	
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP, Country	
FULL NAME SIXTH INVENTOR, IF ANY	
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP, Country	
FULL NAME SEVENTH INVENTOR, IF ANY	
Signature	

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	CHICKEN GROWTH HORMONE RELEASING HORMONE RECEPTOR				
The Healt State of	the specificat	ion of which (check only one item below)):		
		is attached hereto.			
7		was filed as United States application			
=		Number	on		
-		and was amended	on		(if applicable).
÷	\mathbf{x}	was filed as PCT international application	on		
1, m		Number <u>US00/16135</u>	on	June 12, 2000	<u> </u>
≓ ≟		and was amended	on		(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)		RIORITY CL DER 35 U.S	
U.S.A.	60/138,768	12/06/1999	X	Yes	No
U.S.A.	60/176,387	14/01/2000	Х	Yes	No
				Yes	N
				Yes	N
				Yes	N



Combined Declaration for Patent Application and Power of Attorney (Includes Reference to PCT International Applications) Attorney's Docket No. <u>033493-001</u> Page 2 of 3

I hereby appoint the following attorneys and agent(s) to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in connection with international applications directed to said invention:

William L. Mathis	17,337	Eric H. Weisblatt	30,505	Bruce T. Wieder	33,815
Robert S. Swecker	19,885	James W. Peterson	26,057	Todd R. Walters	34,040
Platon N. Mandros	22,124	Teresa Stanek Rea	30,427	Ronni S. Jillions	31,979
Benton S. Duffett, Jr.	22,030	Robert E. Krebs	25,885	Harold R. Brown III	36,341
Norman H. Stepno	22,716	William C. Rowland	30,888	Allen R. Baum	36,086
Ronald L. Grudziecki	24,970	T. Gene Dillahunty	25,423	Brian P. O'Shaughnessy	32,747
Frederick G. Michaud, Jr.	26,003	Patrick C. Keane	32,858	Kenneth B. Leffler	36,075
Alan E. Kopecki	25,813	B. Jefferson Boggs, Jr.	32,344	Fred W. Hathaway	32,236
Regis E. Slutter	26,999	William H. Benz	25,952	Wendi L. Weinstein	34,456
Samuel C. Miller, III	27,360	Peter K. Skiff	31,917	Mary Ann Dillahunty	34,576
Robert G. Mukai	28,531	Richard J. McGrath	29,195		
George A. Hovanec, Jr.	28,223	Matthew L. Schneider	32,814	1 (3 () () () () () () () () ()	
James A. LaBarre	28,632	Michael G. Savage	32,596	21839	
E. Joseph Gess	28,510	Gerald F. Swiss	30,113	21033	
R. Danny Huntington	27,903	Charles F. Wieland III	33,096		

and: Brian P. O'Shaughnessy

Address all correspondence to:



21839

Brian P. O'Shaughnessy, Esq. Burns, Doane, Swecker & Mathis, L.L.P.

P.O. Box 1404

Alexandria, Virginia 22313-1404

Address all telephone calls to: Brian P. O'Shaughnessy at (703) 836-6620.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR	Michael O. Thorner
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP, Country	
FULL NAME SECOND INVENTOR, IF ANY	Bruce David Gaylinn
Signature	
Date	
Residence (City, State, Country)	Louisa, Virginia, U.S.A.
Citizenship	
Mailing Address	16172 Louisa Road
City, State, ZIP, Country	Louisa, Virginia 23093, U.S.A.

033493-001 Attorney's Docket No.

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	СНІСКІ	EN GROWTH HORMONE RELEASING	HORMONE RECEPTOR	
the	e specificat	ion of which (check only one item below):		
		is attached hereto.		
		was filed as United States application		
		Number	on	
		and was amended	on	(if applicable)
	x	was filed as PCT international application		
		Number US00/16135	on June 12, 2000	
		and was amended	on	(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119(a)-(d): COUNTRY (if PCT, indicate "PCT") APPLICATION NUMBER DATE OF FILING (day, month, year) PRIORITY CLAIMED UNDER 35 U.S.C. §119					
U.S.A.	60/138,768	12/06/1999	х	Yes	No
U.S.A.	60/176,387	14/01/2000	х	Yes	N
				Yes	N
				Yes	N
				Yes	N



Combined Declaration for Patent Application and Power of Attorney
(Includes Reference to PCT International Applications)
Attorney's Docket No. 033493-001
Page 2 of 3

I hereby appoint the following attorneys and agent(s) to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in connection with international applications directed to said invention:

William L. Mathis	17,337	Eric H. Weisblatt	30,505
Robert S. Sweeker	19,885	James W. Peterson	26,057
Platon N. Mandros	22,124	Teresa Stanek Rea	30,427
Benton S. Duffett, Jr.	22,030	Robert E. Krebs	25,885
Norman H. Stepno	22,716	William C. Rowland	30,888
Ronald L. Grudziecki	24,970	T. Gene Dillahunty	25,423
Frederick G. Michaud, Jr.	26,003	Patrick C. Keane	32,858
Alan E. Kopecki	25,813	B. Jefferson Boggs, Jr.	32344
Regis E. Slutter	26,999	William H. Benz	25,952
Samuel C. Miller, III	27360	Peter K. Skiff	31,917
Robert G. Mukai	28,531	Richard J. McGrath	29,195
George A. Hovanec, Jr.	28,223	Matthew L. Schneider	32,814
James A. LaBarre	28,632	Michael G. Savage	32,596
U. Joseph Gess	28,510	Gerald F. Swiss	30,113
R. Danny Huntington	27,903	Charles F. Wieland III	33096

Bruce T. Wieder 33,815 Todd R. Walters 34,040 Ronni S. Jillions 31,979 Harold R. Brown III 36341 Allen R. Baum Brian P. O'Shaughnessy 36,086 32,747 Kenneth B. Leffler Fred W. Hathaway 36,075 32,236 Wendi L. Weinstein 34,456 Mary Ann Dillahunty 34,576



and: Brian P. O'Shaughnessy



Address all correspondence to:

MATHIS, L.L.P.

1404

Brian P. O'Shaughnessy, Esq. Burns, Doane, Swecker &

P.O. Box 1404 Alexandria, Virginia 22313-

Address all telephone calls to: Brian P. O'Shaughnessy at 703) 836-6620.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR	Michael O. Thorner
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP, Country	
FULL NAME SECOND INVENTOR, IF ANY	Bruce David Gaylinn
Signature	
Date	
Residence (City, State, Country)	Louisa, Virginia, U.S.A.

ļ.

2384

Combined Declaration for Patent Application and Power of Attorney (Includes Reference to PCT International Applications)
Attorney's Docket No. <u>033493-001</u>
Page 3 of 3

3-00

Citizenship	
Mailing Address	16172 Louisa R oad
City, State, ZIP, Country	Louisa, Virginia 23093, U.S.A.
FULL NAME THIRD INVENTOR, IF ANY	Andrew Alan Toogood
Signature	
Date	11th December 2001
Residence (City, State, Country)	Solihull, West Midlands, United Kingdom GBX
Citizenship	British
Mailing Address	10 Finbury Close
City, State, ZIP, Country	Olton, Solihull, West Midlands 1392 8DH, UK
FULL NAME FOURTH INVENTOR, IF ANY	Steve Harvey
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP, Country	

☐ Additional inventors are being named on the Supplemental Additional Inventor(s) Sheet(s) attached hereto.

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the amonif	Sassian afrakish (akaal anla an	- 14 11	
me specii	fication of which (check only one	e item below):	
[is attached hereto.		
	was filed as United States a	application	
	Number	on	
	and was amended	on	(if applicable)
[x was filed as PCT internatio	onal application	
[was filed as PCT internatio Number US00/16135	onal application on June 12, 2000	

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APP	LICATION(S) AND ANY PRI	ORITY CLAIMS UNDER	35 U.S.C	. §11	9(a)-(d):
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)			CLAIMED .S.C. §119
U.S.A.	60/138,768	12/06/1999	×	Yes	No
U.S.A.	60/176,387	14/01/2000	×	Yes	No
				Yes	No
				Yes	No
				Yes	No



Combined Declaration for Patent Application and Power of Attorney

(Includes Reference to PCT International Applications)

Attorney's Docket No. 033493-001

Page 2 of 3

I hereby appoint the following attorneys and agent(s) to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in connection with international applications directed to said invention:

William L. Mathis Robert S. Swecker Platon N. Mandros Benton S. Duffett, Jr. Norman H. Stepno Ronald L. Grudziecki Frederick G. Michaud, Jr. Alan E. Kopecki Regis E. Slutter Samuel C. Miller, III	17,337 19,885 22,124 22,030 22,716 24,970 26,003 25,813 26,999	Eric H. Weisblatt James W. Peterson Teresa Stanek Rea Robert E. Krebs William C. Rowland T. Gene Dillahunty Patrick C. Keane B. Jefferson Boggs, Jr. William H. Benz	30,505 26,057 30,427 25,885 30,888 25,423 32,858 32,344 25,952	Bruce T. Wieder Todd R. Walters Ronni S. Jillions Harold R. Brown III Allen R. Baum Brian P. O'Shaughnessy Kenneth B. Leffler Fred W. Hathaway Wendi L. Weinstein Mary Ann Dillaburty	33,815 34,040 31,979 36,341 36,086 32,747 36,075 32,236 34,456
Frederick G. Michaud, Jr.	26,003	Patrick C. Keane B. Jefferson Boggs, Jr.	32,858	Kenneth B. Leffler	36,075
Alan E. Kopecki	25,813		32,344	Fred W. Hathaway	32,236

and: Brian P. O'Shaughnessy

Address all correspondence to:



21839

Brian P. O'Shaughnessy, Esq.

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404

Alexandria, Virginia 22313-1404

Address all telephone calls to: Brian P. O'Shaughnessy at (703) 836-6620.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR	Michael O. Thorner
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP, Country	
FULL NAME SECOND INVENTOR, IF ANY	Bruce David Gaylinn
Signature	
Date	
Residence (City, State, Country)	Louisa, Virginia, U.S.A.
Citizenship	
Mailing Address	16172 Louisa Road
City, State, ZIP, Country	Louisa, Virginia 23093, U.S.A.

4-00

Combined Declaration for Patent Application and Power of Auomey (Includes Reference to PCT International Applications)
Attorney's Docket No. 033493-001
Page 3 of 3

Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME FOURTH INVENTOR, IF ANY Sheve Harvey Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME RIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME RIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	FULL NAME THIRD INVENTOR, IF ANY	Andrew Toogood
Residence (City, State, Country) Citizenship Majing Address City, State, ZIP, Country FULL NAME FOURTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Majing Address City, State, ZIP, Country FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Majing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Majing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Majing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date City, State, ZIP, Country FULL NAME RIGETH INVENTOR, IF ANY Signature Date City, State, ZIP, Country FULL NAME RIGETH INVENTOR, IF ANY Signature Date Condense (City, State, Country)		
Citizenship Majiling Address City, State, ZIP, Country FULL NAME FOURTH INVENTOR, IF ANY State Harrey State City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Date	
Mailing Address City, State, ZIP, Country FULL NAME FOURTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME RIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME RIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Residence (City, State, Country)	
City, State, ZIP, Country FULL NAME FOURTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Cidzenship Mailing Address City, State, ZIP, Country Cidzenship Mailing Address City, State, ZIP, Country Cidzenship Mailing Address City, State, ZIP, Country FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Cidzenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Cidzenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Cidzenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Cidzenship Mailing Address City, State, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Cidzenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Citizenship	
FULL NAME FOURTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Mailing Address	
Signature Date Residence (City, State, Country) Citizenship Rull NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	City, State, ZIP, Country	
Signature Date Residence (City, State, Country) Citizenship Rilling Address City, State, ZTP, Country FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZTP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZTP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZTP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZTP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZTP, Country FULL NAME RIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	FULL NAME FOURTH INVENTOR, IF ANY	Steve Harvey
Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) FULL NAME RIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)		Sleve Harris
Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) FULL NAME RIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Date	Dec 11th 2001
Mailing Address CIZ HUNTENS CLOSE City, State, ZIP, County FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) FULL NAME REGRITH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Residence (City, State, Country)	FAMONIAN ALBERTA CANADA COM
Mailing Address Clty, State, ZIP, Country FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address Clty, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address Clty, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address City, State, ZIP, Country) Gignature Date Residence (City, State, Country) Citzenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) FULL NAME RIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Citizenship	BRITISH
City, State, ZIP, Country FULL NAME FIFTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citzenship Mailing Address City, State, ZIP, Country FULL NAME REGETTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Mailing Address	
Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	City, State, ZIP, Country	
Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country Citizenship Mailing Address City, State, ZIP, Country FULL NAME REGETTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) FULL NAME RIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	FULL NAME FIFTH INVENTOR, IF ANY	CHICADA CANONDA
Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signaure Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signaure Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signaure Date Residence (City, State, Country) FULL NAME RIGHTH INVENTOR, IF ANY Signaure Date Residence (City, State, Country)		
City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Majling Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME RIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Date	
Mailing Address City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME REGISTER INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Residence (City, State, Country)	
City, State, ZIP, Country FULL NAME SIXTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Majling Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Citizenship	
Signature Date Residence (City, State, Country) Citizenship Majling Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Mailing Address	
Signature Date Residence (City, State, Country) Citizenship Majling Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	City, State, ZIP, Country	
Signature Date Residence (City, State, Country) Citizenship Majling Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	FULL NAME SIXTH INVENTOR, IF ANY	
Residence (City, State, Country) Citizenship Majling Address City, State, ZiP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZiP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signsture Date Residence (City, State, Country)		
City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)		
Mailing Address City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	Residence (City, State, Country)	
City, State, ZIP, Country FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)		
FULL NAME SEVENTH INVENTOR, IF ANY Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)		
Signature Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME HIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)		
Date Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME HIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)	full name seventh inventor, if any	
Residence (City, State, Country) Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)		
Citizenship Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)		
Mailing Address City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)		
City, State, ZIP, Country FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)		
FULL NAME EIGHTH INVENTOR, IF ANY Signature Date Residence (City, State, Country)		
Signature Date Residence (City, State, Country)		
Date Residence (City, State, Country)		
Rosidence (City, State, Country)	· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·	
Citizenship		
	Citizenship	